PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/705,931			ing Date 13/2003	To be Mailed	
APPLICATION AS FILED PART I (Column 1) (Column 2)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
	FOR	N	NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i), (ii)	or (m))	N/A		N/A			N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p).		N/A		N/A			N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•		i	x \$ =		OR	x \$ =		
IND	EPENDENT CLAIM CFR 1.16(h))	S	mi	inus 3 = *	•			x \$ =			x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	shee is \$2 addi	If the specification and drawing sheets of paper, the application is \$250 (\$125 for small entity) additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37 (due See							
	MULTIPLE DEPEN	IDENT CLAIM PR	7 CFR 1.16(j))										
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL			TOTAL		
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT	12/26/2006	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	PRESE LY EXTR			RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	• 21	Minus	~ 20	= 1		ĺ	x \$ =		OR	X \$50=	50	
	Independent (27 CFR 1.16(h))	• 3	Minus	***3	= 0		ı	x \$ =		OR	X \$200=	0	
	Application Size Fee (37 CFR 1.16(s))								-				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	50	
	1-29-07	(Column 1)		(Column 2	(Colum	ın 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOI	PRESE			RATE (\$)	ADDITIONAL FEE (\$)		RATE(\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16(i))	. 21	Minus	- 21	=	.		x \$ =		OR	xs =		
	Independent (37 CFR 1.16(h))	· 3	Minus	··· 3	= —	-		x \$ =		OR	x s =		
	Application Size Fee (37 CFR 1.16(s))											X	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
							•	TOTAL ADD'L FEE		OR	TOTAL/ ADD'L FEE		
** If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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